

Entered - 8-17-01- sb  
CL - 01L0524 ALEXIS HOLMES

01- *ℓ* -1751

CLAIM OF: **CARL M. DRURY, III**  
525 Taunton Way  
Atlanta, Georgia 30319

For damages alleged to have been sustained as a result of a vehicular accident on July 30, 2001 at 6011 South Terminal-Byway.

BY PUBLIC SAFETY AND  
LEGAL ADMINISTRATION COMMITTEE:

**BE IT RESOLVED** by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **CARL M. DRURY, III** the sum of **\$1,115.60** in full settlement and satisfaction of all claims, past, present and future, of every kind and character **for damages alleged to have been sustained as a result of a vehicular accident on July 30, 2001 at 6011 South Terminal-Byway** as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD  
CITY ATTORNEY

BY:   
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

**DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. 01L0524

Date: 10/05/01

Claimant /Victim CARL M. DRURY, III

BY: (Atty)(Ins.) \_\_\_\_\_

Address: 525 Taunton Way Atlanta, Georgia 30319

Subrogation: \_\_\_\_\_ Claim for Property damage \$ 1,165.46 Bodily Injury \$ \_\_\_\_\_

Date of Notice: 8/16/01 Method: Written, proper X Improper \_\_\_\_\_

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 7/30/01 Place: 6011 South Terminal-Byway

Department Police Division: FOD

Employee involved Officer Benjamin George Disciplinary Action: Oral Reprimand

**NATURE OF CLAIM:** The driver of the City vehicle misjudged his clearance and struck the rear end of the claimant's parked vehicle causing damages in the above amount.

**INVESTIGATION:**

Statements: City employee \_\_\_\_\_ Claimant X Other \_\_\_\_\_ Written \_\_\_\_\_ Oral X

Pictures \_\_\_\_\_ Diagrams X Reports: Police X Dept Report \_\_\_\_\_ Other \_\_\_\_\_

Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

**BASIS OF RECOMMENDATION:**

Function: Governmental X Ministerial \_\_\_\_\_

Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable X

City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement X

Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_

Claimant Negligent \_\_\_\_\_ City Negligent X Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
\_\_\_\_\_  
INVESTIGATOR - ALEXIS HOLMES

**RECOMMENDATION:**

Pay \$ 1,115.60 Adverse \_\_\_\_\_ Account charged: 1A01 X 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_

Claims Manager:  Concur/date 10-16-01

Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

**COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK**

City Hall  
55 Trinity Avenue, S.W.  
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date:

Holmes

08/16/01

Dear Municipal Clerk:

ENTERED - 8-17-01 - SB  
0110524 - ALEXIS HOLMES

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ Approximately \$4,000.00 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: 7/30/01 2. Time of Incident: 11:35 3. Police called: Yes ☒ Yes ☐ No  
(month/day/year)

4. Location of incident (including street address): Atlanta Airport Parking lot

5. Name of your insurance company: Cotton States, I will not pay Policy No.         

6. State what and how incident occurred: Police car hit my parked car at airport. (see enclosed accompanying police report).

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: Ford 5-70 99 810-RKN Parked Vehicle  
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: Ford Crown Vic George Benjamin Sr. City of Atlanta Police  
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: George Benjamin Sr. 675 Ponce de Leon Ave.           
(Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Carl M. Drury III  
Signature of Claimant

Carl M. Drury, III  
(Print Claimant's Name)

525 Taunton Way  
(Address)

Atlanta, GA 30319  
(City, State and Zip Code)

404-760-7608 404-784-0058  
(Work Number) (Home Number)

01- R-1751